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PATENT APPLICATION FEE DETERMINATION RECORD

Application of information unless it displays a valid OMB-control number.

Application of the Paperwork Reduction of the Paperwork Reduction of the Paperwork Reduction of the Paperwork Reduction National Research (ISSA).

Application of the Paperwork Reduction National Research (ISSA). PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN (Column 1) SMALL ENTITY OR (Column 2) SMALL ENTITY FÓR NUMBER FALED NUMBER EXTRA RATE RATE BASIC FEE FEE (37 CFR 1,16(a)) OR TOTAL CLAIMS (37 CFR.1.16(c)) minus 20 = OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR 'if the difference in column 1 is less than zero, enter "O" in column 2. TOTAL OB TOTAL CLAIMS AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) OR (Column 3) SMALL ENTITY SMALL ENTITY CLAMS HIGHEST REMAINING PRESENT NUMBER RATE ADDL AFTER AMEND/ONT ENDMENT PREVIOUSLY RATE ADOL-EXTRA TIONAL TIONAL PAID FOR FEE FEE · Fotal x 25 CF CFR 1.16/ch <u>×3</u>50 OR Minus x:_]0C 20E OR FRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4)) +2360 OR TOTAL TOTAL ADD'L FEE ADO'L FEE OR (Column 1) (Column 2) (Column 3) CLAMS HIGHEST 8 REMAINING NUMBER PRESENT RATE ADDI-TIONAL RATE ADOL ENDMENT AFTER **PREVIOUSLY EXTRA** AMENDMENT PAID FOR FEE Total CFR 1.14(4) Mirus 25 5 OR Minus ٠. ٠ na. FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 OFR 1.16(d)) 18Q +.360 OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST O REMAINING PRESENT RATE ADDI-RATE ENT ADDL AFTER PREVIOUSLY EXTRA TIONAL TIONAL AMENDMENT PAID FOR FEE Total (DI OFR 1.15(ct) Minus AMENDM Independent (SF CFR 1.16(b)) <u>ulD(</u> FIRST PRESENTATION OF MALTIPLE DEPONDENT CLAIM (37 OFR 1.16(4)) + ,36C OR TOTAL ADD'L FEE OR ADD'S FEE If the entry in column 1 is less than the entry in column 2, write, "O" in polyron 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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Instruction of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.